

Mary C. Mayhew, Commissioner

Department of Health and Human Services Maine Center for Disease Control and Prevention 286 Water Street 11 State House Station Augusta, Maine 04333-0011 Tel.: (207) 287-8016; Fax: (207) 287-9058 TTY Users: Dial 711 (Maine Relay)

March 6, 2013

We are writing to inform you of a new resource available to obstetrical and pediatric providers caring for pregnant women and their newborns in Maine. This resource is a tool for your use to assist the State of Maine in improving pregnancy outcomes for Maine women and their families. In general, Maine ranks well in national statistics related to pregnancy and birth outcomes. However, since the passage of a law in 2004 requiring Maine hospitals and pediatric providers to notify the Office of Child and Family Services in the Department of Health and Human Services, of babies who are at risk of neonatal abstinence syndrome (NAS) we have seen a significant annual increase in the number of babies with NAS.

Substance abuse is associated with adverse pregnancy outcomes, including preterm birth, placental abruption, intrauterine death, low birth weight, and neonatal withdrawal. Exposure to alcohol is a leading preventable cause of birth defects and developmental disabilities in the United States. Screening for alcohol and drug use early in the course of pregnancy allows timely referral for substance abuse treatment when needed. The American College of Obstetricians and Gynecologists and the American Society for Addiction Medicine recommend universal screening for pregnant women for drug and alcohol use. The American Academy of Family Practice Physicians recommends periodic screening for all adolescents and adult patients. The earlier that screening and referral for treatment occur, the greater the opportunity to reduce harm to both mother and baby.

The Maine Chapter of the American Academy of Pediatrics, in partnership with obstetric, pediatric and substance abuse specialists across Maine, and the Maine CDC, developed obstetrical practice guidelines for the screening and treatment of pregnant women dependent upon alcohol or other prescribed or non-prescribed substances such as methadone, buprenorphine, and oxycontin. One hard copy of Snuggle ME Guidelines will be provided to each of the 30 birth hospitals and will also be available through the internet for downloading from the Maine Center for Disease Control and Prevention, Division of Population Health, Children with Special Health Needs under http://www.maine.gov/dhhs/mecdc/population-health/cshn/index.html

The guidelines provide easy-to-use screening and treatment checklists. They are supported by strong evidence-based research and include a comprehensive bibliography. Implementation of these guidelines will improve birth outcomes related to Maine's serious issue of perinatal addiction.

Sincerely,

Dr. Sheila G. Pinette, D.O. Director, Maine CDC

Dr. Sheila G. Pinette